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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/508,794	<b>FILING DATE</b> 06/01/2000 <b>RULE</b> -	<b>CLASS</b> 375	<b>GROUP ART UNIT</b> 2631	<b>ATTORNEY DOCKET NO.</b> 65705-0002
<b>APPLICANTS</b> Glenn Rolus Borgward, Munchen, GERMANY;				
<b>** CONTINUING DATA *****</b> THIS APPLICATION IS A 371 OF PCT/EP98/06008 09/21/1998				
<b>** FOREIGN APPLICATIONS *****</b> GERMANY 197 414 53.2 09/19/1997				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 10/16/2000</b>				
<b>Foreign Priority claimed</b> <input type="checkbox"/> yes <input type="checkbox"/> no <b>35 USC 119 (a-d) conditions met</b> <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance <b>Verified and Acknowledged</b> <u>Examiner's Signature</u> <u>Initials</u>		<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWING</b> 46	<b>TOTAL CLAIMS</b> 1
<b>INDEPENDENT CLAIMS</b> 1				
<b>ADDRESS</b> 010291				
<b>TITLE</b> Digital book				
<b>FILING FEE RECEIVED</b> 566	<b>FEES: Authority has been given in Paper</b> No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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Bib Data Sheet

CONFIRMATION NO. 1859

<b>SERIAL NUMBER</b> 09/508,794	<b>FILING DATE</b> 06/01/2000 <b>RULE</b>	<b>CLASS</b>	<b>GROUP ART UNIT</b> 2673	<b>ATTORNEY DOCKET NO.</b> 65705-0002	
<b>APPLICANTS</b> Glenn Rolus Borgward, Munchen, GERMANY; <b>** CONTINUING DATA *****</b> <i>yes A.M</i> THIS APPLICATION IS A 371 OF PCT/EP98/06008 09/21/1998 <b>** FOREIGN APPLICATIONS *****</b> <i>yes A.M</i> GERMANY 197 414 53.2 09/19/1997 <b>IF REQUIRED, FOREIGN FILING LICENSE</b> <b>** SMALL ENTITY **</b> <b>GRANTED ** 10/16/2000</b>					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <i>A.M</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWING</b> 46	<b>TOTAL CLAIMS</b> 1	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> 10291					
<b>TITLE</b> Digital book					
<b>FILING FEE RECEIVED</b> 566	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		